

# WELDED REPAIR RECORD

Personal information you provide may be used for secondary purposes [Privacy Law, s. 15.04 (1)(m)].

<b>Repair Completed on:</b> _____		<b>Wisconsin Reg. No.</b>
<input type="checkbox"/> <b>Power Boiler</b>	<input type="checkbox"/> <b>Heating Boiler</b>	<b>National Board No.</b>
<input type="checkbox"/> <b>Pressure Vessel</b>	<input type="checkbox"/> <b>Miniature Boiler</b>	<b>Serial No.</b>
<b>Manufacturer</b>		<b>Other No.</b>
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<b>WORK COMPLETED BY:</b>		<b>IN THE PLANT OF:</b>
<b>Name</b>		<b>Owner's Name</b>
<b>Street Address</b>		<b>Location of Repair</b>
<b>City, Town, Village</b>	<b>State</b>	<b>Zip</b>
<b>Repair Program No.</b>		
<b>Description of Repair, attach additional page if needed (use reverse side of this page for sketch).</b>		

Hydrostatic Test PSI \_\_\_\_\_ NDE \_\_\_\_\_

Repair made in accordance with the requirements of the Wisconsin Department of Commerce, Wisconsin Administrative Code Chapter 41.

The welding was completed by \_\_\_\_\_, who has met the test requirements of Chapter 41.

Welding procedure specification: \_\_\_\_\_

Contractor Rep. Signature: \_\_\_\_\_ Dated \_\_\_\_\_

I, the undersigned, have inspected the work described in this report and state that this work, to the best of my knowledge and belief, has been done in accordance with the requirements of Wis. Adm. Code Chapter Comm 41. By signing this certificate, neither the inspector nor his/her employer makes any warranty, expressed or implied, concerning the work described in this report. Furthermore, neither the inspector nor his/her employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection. The only exception is for such liability that may be provided in an insurance policy which the inspector's insurance company may issue for the object, and then only in accordance with terms of that policy.

<b>Authorized Inspector Signature Cert. No.</b>	<b>Employed By</b>	<b>Dated</b>
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